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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorn	ey Docket No.		Ħ
First II	nventor	LESTER SUSSMAN	Q
Title			U.
Express Mail Label No.		о.	02

(Only for new nonprovision	al applications under 37 CFR 1.53(b)) Express Mail Label No.			
APPLICA	TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application			
See MPEP chapter 600 conc	erning utility patent application conte	nts. Washington, DC 20231			
(Submit an original and a decomposition of the second	[Total Pages Z\]	 CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) Computer Readable Form (CRF) 			
- Descriptive title		b. Specification Sequence Listing on:			
- Statement Rega	e to Related Applications arding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or			
	quence listing, a table, rogram listing appendix	i i. paper			
- Background of		c. Statements verifying identity of above copies			
- Brief Summary		ACCOMPANYING APPLICATION PARTS			
- Brief Descriptio - Detailed Descri	n of the Drawings (if filed)	9. Assignment Papers (cover sheet & document(s))			
- Claim(s)	p. 1011	37 CFR 3.73(b) Statement Power of			
- Abstract of the	Disclosure	(when there is an assignee) Attorney			
4: Drawing(s) (35 U	S.C. 113) [Total Sheets	Information Disclosure Copies of IDS			
5. Oath or Declaration	[Total Pages 2.]] 12.			
a. Newly execu	uted (original or copy) prior application (37 CFR 1.63 (d))	13. Preliminary Amendment			
b (for continua	tion/divisional with Box 18 completed	(critaria 20 opositioan) itarini2007			
	ION OF INVENTOR(S) Itement attached deleting inventor(s)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
named in t	he prior application, see 37 CFR	16. Nonpublication Request under 35 U.S.C. 122			
1.63(d)(2)	and 1.33(b).	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
6. Application Data	Sheet. See 37 CFR 1.76	17. Other:			
18. If a CONTINUING APPLI	CATION, check appropriate box, and	t supply the requisite information below and in a preliminary amendment,			
or in an Application Data She	eet under 37 CFR 1.76:				
Continuation	Divisional Continuation-in-part	(CIP) of prior application No.:/			
Prior application information:	Examiner	Group Art Unit:			
For CONTINUATION OR DIVISI	ONAL APPS only: The entire disclosure	e of the prior application, from which an oath or declaration is supplied under ontinuation or divisional application and is hereby incorporated by reference.			
The incorporation can only be	rthe disclosure of the accompanying c relied upon when a portion has been in	ontinuation or divisional application and is hereby incorporated by reference. advertently omitted from the submitted application parts.			
		ONDENCE ADDRESS			
Customer Number or Bar Co	ode Label (Insert Customer No. or Al				
Name	LESTER SUSSMAN	1			
	9213 BULLS RU	N PARKWAY			
Address					
City	BETHE SDA	State MARYLAND Zip Code 20817			
Country	U.S.A.	Telephone 301-897-3238 Fax 301-897-0018			
Name (Dried)Toron	LE STER SUSSMAN	Registration No. (Attorney/Agent)			
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Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known			
Application Number			
Filing Date			
First Named Inventor	LESTER SUSSMAN		
Examiner Name			
Group Art Unit			
Attorney Docket No.			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	Large Entity Small Entity			
Deposit	Fee Fee Fee Fe Code (\$) Code (\$)	ee Description Fee Paid		
Account Number		te filing fee or oath		
Deposit				
Account Name	127 50 227 25 Surcharge - la cover sheet	te provisional filing fee or		
The Commissioner is authorized to: (check all that apply)	139 130 139 130 Non-English s	pecification		
Charge fee(s) indicated below Credit any overpayments	147 2,520 147 2,520 For filing a red	quest for ex parte reexamination		
Charge any additional fee(s) during the pendency of this application		ublication of SIR prior to		
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.	Examiner action			
FEE CALCULATION	113 1,840* 113 1,840* Requesting pt Examiner acti	ublication of SIR after on		
1. BASIC FILING FEE	115 110 215 55 Extension for	reply within first month		
Large Entity Small Entity	116 400 216 200 Extension for	reply within second month		
Fee Fee Fee Fee Description	117 920 217 460 Extension for a	reply within third month		
0000 (V)	118 1,440 218 720 Extension for a	reply within fourth month		
101 740 201 370 Utility filing fee 370 106 330 206 165 Design filing fee	128 1,960 228 980 Extension for a	reply within fifth month		
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appe	aal		
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in	support of an appeal		
114 160 214 80 Provisional filing fee	121 280 221 140 Request for or	al hearing		
SUPTOTAL (4) (ft) 270	138 1,510 138 1,510 Petition to inst	itute a public use proceeding		
SUBTOTAL (1) (\$) 370	140 110 240 55 Petition to revi	ive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		ive - unintentional		
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee			
Total Claims 12 -20** = X = X	143 460 243 230 Design issue f			
Claims	144 620 244 310 Plant issue fee			
Multiple Dependent		e Commissioner		
Large Entity Small Entity		e under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description		f Information Disclosure Stmt		
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20		ch patent assignment per s number of properties)		
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submi (37 CFR § 1.1	ission after final rejection (29(a))		
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 ** Reissue independent claims		itional invention to be CFR § 1.129(b))		
over original patent	179 740 279 370 Request for C	Continued Examination (RCE)		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	'	expedited examination		
SUBTOTAL (2) (\$) <i>Q</i>	Other fee (specify)			
the sumber and involvenid if greaters for Poissure, see above	*Reduced by Basic Filing Fee Paid	SUBTOTAL (3) (\$)		

SUBMITTED BY			Complete (if applicable)	Complete (if applicable)	
Name (Print/Type)	LESTER SUSSMAN	Registration No. (Attorney/Agent)	Telephone 301-897-3288		
Signature	EUSSUN		Date 02 06 02		

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